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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/810,499	03/26/2004	Masayuki Tsuda	9683/179	8154
27879 7590 12/27/2007 INDIANAPOLIS OFFICE 27879 BRINKS HOFER GILSON & LIONE			EXAMINER	
			SAMS, MATTHEW C	
	A SQUARE, SUITE 16 .IS, IN 46204-2033	00	ART UNIT	PAPER NUMBER
			2617	
	•		NOTIFICATION DATE	DELIVERY MODE
			12/27/2007	ELECTRONIC

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

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Application No. Applicant(s) 10/810,499 TSUDA ET AL. Interview Summary Examiner Art Unit 2617 Matthew C. Sams All participants (applicant, applicant's representative, PTO personnel): (1) Matthew C. Sams. (4)_ _ (2) Sanders Hillis (45712). Date of Interview: 17 December 2007. Type: a)⊠ Telephonic b)□ Video Conference c) Personal [copy given to: 1) applicant 2) applicant's representative Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description: Claim(s) discussed: 5 and 9. Identification of prior art discussed: Moon US-6,385,662. Agreement with respect to the claims f(X) was reached. g(X) was not reached. g(X) N/A. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Potential differences between the cited prior art and claim 5 were discussed and they will require further search/consideration. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required